

FORM LM-30
LABOR ORGANIZATION OFFICER AND
EMPLOYEE REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 439 or 440.

For Official Use Only

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

AUG 22 2005

1. File Number U - <u>12263</u>	2. Fiscal Year Covered From: <u>02/01/2004</u> Through: <u>02/31/2005</u>
3. Name and address of person filing. Name <u>Peter Korody</u> P.O. Box, Bldg., Room No., if any <u>Ste A-B</u> Street <u>1911 N. Saffery</u> City <u>San Pedro</u> State <u>CA</u> ZIP Code - 4 <u>90731</u>	4. Name, file number, and address of labor organization. Name <u>International Brotherhood of the Teamsters</u> Labor Organization File Number <u>010915</u> P.O. Box, Building and Room Number, if any <u>Ste A</u> Street <u>1711 W. McKinnon</u> City <u>Seattle</u> State <u>WA</u> ZIP Code + 4 <u>98119</u>
5. Position in labor organization. <u>Regional Director - Southern California</u>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name _____ Trade Name, if any: _____ P.O. Box, Bldg., Room No., if any _____ Street _____ City _____ State _____ ZIP Code - 4 _____	7. a. Nature of Interest, Transaction, or Income. _____ _____ _____ 7. b. Amount. _____ _____ _____

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

Signed

Peter Korody

On

8-12-05

Date

(310) 521-9003

Telephone Number

Name of Person Filing Peter Karody File Number U-

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name IBU Natl Health Benefit Trust

Trade Name, if any:

P.O. Box, Bldg., Room No., if any Suite 300

Street 1220 S.W. Morrison St

City Portland

State OR ZIP Code + 4 97205-2222

9. Business deals with:

☐ a. Labor Organization

☒ b. Trust

☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name IBU Natl Health Benefit Trust

Trade Name, if any:

P.O. Box, Bldg., Room No., if any Suite 300

Street 1220 S.W. Morrison St

City Portland

State OR ZIP Code + 4 97205-2222

11.a. Nature of such dealing.

Reimbursement for trust
meeting expenses.

11.b. Approximate dollar value of such dealing. \$125.77

12.a. Nature of interest held or income received.

12.b. Amount.

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

14.a. Nature of payment:

14.b. Amount of payment

13.b. Is the Business an Employer or Consultant ?